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PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998

Application or Docket Number

09/429226

1,4,17, CLAIMS AS FILED - PART I									SMALL ENTITY			OTHER THAN	
			(Column 1)				(Column 2)				OR		
FOR		NUMB	ER FILE)	NUMBER	EXTRA	11	RATE	FEE	7	RATE	FEE	
BASIC FEE						` /	ý			380.00	OR		760.00
TOTAL CLAIMS			d	L mini	us 20=	. 4			X\$ 9=		OR	X\$18=	12.00
INDEPENDENT CLAIMS 4 / minus 3 = * /							11	X39=		OR	X78=	18.00	
MULTIPLE DEPENDENT CLAIM PRESENT] [+130=		OR	+260=	_
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II									TOTAL		OR	<u> </u>	910.00
											-	OTHER	
	(Column 1) (Column 2) (Column 3)							<u>)</u>	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		REM	AIMS AINING TER IDMENT		P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 2	2	Minus	**	24	= 🚫]	X\$ 9=	,	OR	X\$18=	- 1
AME	Independent	*	Y OF W	Minus	**	9	<u> </u>	4 [X39=		OR	XX	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130=										OR	+260=	
	TOTAL									E .	OR	TOTAL	
		(Coli	umn 1)		"	Column 2)	(Column 2)		DDIT. FEE	L	J • · ·	ADDIT. FEE	
			AIMS			HIGHEST	(Column 3)	1 -	-	4001	- 4		
AMENDMENT B		AF	AINING TER IDMENT			NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=	$\ \ $	X\$ 9=	*	OR	X\$18=	
	Independent	*	N OF M	Minus	**		-	Ιſ	X39=		OR	X78=	
	FIRST PRESE	NIAIIO	N OF M		EPENI	JENI CLAIM		J _	+130=		OR	+260=	
								Δ.	TOTAL DDIT, FEE		OR	TOTAL	
		(Col:	ımn 1)		ıc	Column 2)	(Column 3)		JUII, FEE			ADDIT. FEE	V V
			AIMS			HIGHEST	100.0111110] _	1	ADDI			1001
AMENDMENT C		AF	NNING TER DMENT		PI	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE-	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* 1		Minus	***			 -	X39=			X78=	
١.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM] -	,w3-		OR	A/ 0=	
	laboratura biran		Ab*		.l C		h 0		+130=		OR	+260≃	
*	* If the ntry in column 1 is less than the ntry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, ent r "3."										OR	TOTAL ADDIT. FEE	
	i the "Highest Nur Th: "Highest Nurr							er found	d in the app	propriat box	in col	umn 1,	